## MULTIP EPENDENT CLAIM FEE CALULATION SHEET (FOR USE WITH FORM PTO-875)

1 0 11559
APPLICANT(S)

FILING DATE

CLAIMS

|            |             |            |                   |          |                    | C  |
|------------|-------------|------------|-------------------|----------|--------------------|--|
|            | AS FILED    |            | AFTER L'AMENDMENT |          | AFTER 2 TAMENDMENT |  |
|            | IND.        | DEP.       | IND.              | DEP.     | IND.               | DEP.   |
| 1          | 0           |            | 1                 |          |                    |  |
| 2          |             | - 0        |                   | \$       |                    |  |
| 3          |             |            |                   | 1        |                    |  |
| 4          |             | <u>_</u> _ |                   | i        |                    |  |
| 5          |             | 5          |                   | 1        |                    |  |
| 6          |             |            |                   | 1        |                    |  |
| 7          | <del></del> |            |                   | 1        |                    |  |
| 8          |             |            |                   | 1        |                    |  |
| 9          |             | -          |                   | - 1      |                    |  |
| 11         |             | - 84       |                   |          |                    |  |
| 12         | •           |            | -                 |          |                    | -  |
| 13         |             | 1          |                   |          |                    |  |
| 14         |             | R          |                   |          |                    |  |
| 15         | -           | 0          |                   |          |                    |  |
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| 17         |             |            |                   |          |                    |  |
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| 23         |             |            |                   | 1        |                    |  |
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| 26<br>27   |             |            |                   |          |                    |  |
| 28         |             |            |                   |          |                    |  |
| 29         |             |            |                   |          |                    |  |
| 30         |             |            |                   |          |                    |  |
| 31         | -           |            |                   |          |                    |  |
| 32         |             |            |                   |          |                    |  |
| 33         |             |            |                   |          |                    |  |
| 34         |             |            |                   |          |                    |  |
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| 37         |             |            |                   |          |                    | <b>  </b>  |
| 38         |             |            |                   |          |                    | <b>-</b>   |
| 39         |             |            |                   |          | <b></b>            | <del></del>  |
| 40<br>41   |             |            |                   |          |                    | <del>                                     </del>   |
| 42         |             |            |                   |          |                    | $\vdash \vdash \vdash$   |
| 43         |             |            |                   |          |                    |  |
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| 49         |             |            |                   |          | <u> </u>           | <u> </u>   |
| 50         |             | ļ <u>.</u> |                   |          |                    | <b> </b>   |
| TOTAL IND. | 2           | 1          | 3                 | 1        |                    | ] 🔻  |
| TOTAL DEP  | 19          | <b>4</b>   | 17                | <b>4</b> |                    | <b>(=</b>  |
| TOTAL      | 21          |            | 20                |          |                    |  |
| CLAIMS     |             |            | 00                | 45/4 432 | L                  | A PARTIE AND A PAR |

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|                             | AS FILED |          | AFTER I AMENDMENT |         | AFTER 2 MAMENDMENT |            |  |
|                             | IND.     | DEP.     | IND.              | DEP.    | IND.               | DEP.       |  |
| 51                          | ļ        |          |                   |         |                    |            |  |
| 52                          |          |          |                   |         |                    |            |  |
| 53                          |          |          | ·                 | <b></b> |                    |            |  |
| 54<br>55                    |          |          |                   |         |                    |            |  |
| 56                          |          | -        |                   |         |                    |            |  |
| 57                          |          |          |                   |         | <del></del>        | -          |  |
| 58                          |          |          |                   |         |                    |            |  |
| 59                          |          |          |                   |         |                    |            |  |
| 60                          |          |          |                   |         |                    |            |  |
| 61                          |          |          |                   |         |                    |            |  |
| 62                          |          |          |                   |         |                    | -          |  |
| 63                          |          |          |                   |         |                    |            |  |
| 64                          |          |          |                   |         |                    |            |  |
| 65                          |          |          |                   |         |                    |            |  |
| 66                          |          |          |                   |         |                    |            |  |
| 67                          |          |          |                   |         |                    |            |  |
| 68                          |          |          |                   |         |                    |            |  |
| 69                          |          |          |                   |         |                    |            |  |
| 70                          |          |          |                   |         |                    |            |  |
| 71<br>72                    |          |          | -                 |         |                    |            |  |
| 73                          |          |          |                   |         |                    |            |  |
| 74                          |          |          |                   |         |                    |            |  |
| 75                          |          |          |                   | -       |                    |            |  |
| 76                          |          |          |                   |         |                    |            |  |
| 77                          |          |          |                   |         |                    |            |  |
| 78                          |          |          |                   |         |                    |            |  |
| 79                          |          |          |                   |         |                    |            |  |
| 80                          |          |          |                   |         |                    |            |  |
| 81                          |          |          |                   |         |                    |            |  |
| 82                          |          |          |                   |         |                    |            |  |
| 83                          |          |          |                   |         |                    |            |  |
| 84                          |          |          |                   |         |                    |            |  |
| 85_                         |          |          |                   |         |                    |            |  |
| 86<br>87                    |          |          |                   |         |                    |            |  |
| 88                          |          |          |                   |         |                    |            |  |
| 89                          |          |          |                   |         |                    |            |  |
| 90                          |          |          |                   |         |                    |            |  |
| 91                          |          |          |                   |         |                    |            |  |
| 92                          |          |          |                   |         |                    |            |  |
| 93                          |          |          |                   |         |                    |            |  |
| 94                          |          |          |                   |         |                    |            |  |
| 95                          |          |          |                   |         |                    |            |  |
| 96                          |          |          |                   |         |                    |            |  |
| 97<br>98                    |          |          |                   |         |                    |            |  |
| 99                          |          |          |                   |         | -                  |            |  |
| 100                         |          |          |                   |         |                    |            |  |
|                             |          | -        |                   | - F     |                    |            |  |
| TOTAL IND.                  |          | 4        |                   | ₩.      |                    | ❤          |  |
| TOTAL DEP                   |          | <b>+</b> |                   | 4       |                    | <b>4</b> 2 |  |
| TOTAL<br>CLAIMS             |          |          |                   |         |                    |            |  |
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